

# **Workshop on FVIII Inhibitors in PTP's**

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## **Proposal for Prospective Pharmacosurveillance**

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Workshop on FVIII Inhibitors  
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# Workshop on FVIII Inhibitors in PTP's

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The Question: Host or Product?



## Post-Licensure Pharmacosurveillance

- Will pre-licensure clinical trials have the power to ascertain true PTP inhibitor incidence?

or

- Will a post-licensure pharmacosurveillance program be required?

# Why Pharmacosurveillance?

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- Post-marketing pharmacovigilance recognized by industry / regulatory organization as important to identification of **ongoing safety / efficacy concerns** and **redefining risk / benefit ratios**.<sup>1</sup>
- Currently, **“mandatory” spontaneous AE reporting** of clinical safety / efficacy concerns is primary method of surveillance.

<sup>1</sup>. Talbot JCC and Nilsson BS. Br J of Clin Pharmacol, 1998.

# Spontaneous AE Reporting

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## Important Function

- Alerts physicians / regulators / industry to
  - early strong drug-event causal associations<sup>1</sup>
  - severe unexpected adverse events<sup>2</sup>
- ***Fosters suspicions ® prompts further warranted investigation<sup>2</sup>***

1. Tubert P, et al. J Clin Epidemiol, 1992

2. Alvarez-Requejo A et al. Eur J. Clin Pharmacol, 1998.

3. Goldman S. Clinical Therapeutics, 1998.

# Spontaneous AE Reporting

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## Limitations

### ➤ Underreporting

- < 10% SAE's; < 4% AE's are reported
- precipitous decline in reporting after 2<sup>nd</sup> post-marketing year

### ➤ Confounders / Biases

- reporting environment
- quality of data
  - numerator / denominator inaccuracies
  - temporally-associated clinical and lab data
  - challenge /re-challenge information
  - outcome

Goldman S, 1998

Talbot JCC and Nilsson BS, 1998

11/03

# Pharmacosurveillance Alternative

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- **Post licensure randomized clinical trials**
  - industry-sponsored
  - larger subject accrual than pre-licensure study
  - very expensive if to GCP specs
  
- **Post-marketing cohort studies**
  - industry-sponsored
  - slow recruitment / lack of control arm
  
- \* **Long-term global pharmacosurveillance programs**
  - industry-sponsored, or
  - independent of / supported by industry
  - facilitated by regulatory harmonization

# Workshop on FVIII Inhibitors in PTP's

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The Question: Host or Product?



## Post-Licensure Pharmacovigilance

- Assuming the need for a long-term pharmacovigilance program, what are its necessary elements with respect to:
  - **project scope**
    - HTC / government agency / industry participation?
    - type of data collection?
    - surveillance period
  - **clinical / laboratory data collection / analysis / reporting**
    - national vs. international databases?

# Workshop on FVIII Inhibitors in PTP's

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The Question: Host or Product?



## Post-Licensure Pharmacovigilance (cont'd)

- Role of physician organizations? Government agencies? Industry?
- Funding?



# Proposed PS Program

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## Participation



- **Universal data collection system for all FVIII products**

**Products globally distributed**



**International Database**

**Products with limited distribution**



**National / Multinational Database**

- **Hemophilia treater-driven\***

\* Vermylen and Briet, Lancet 1993

# Proposed PS Program

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## Subject Selection



### ➤ PTP's

- defined by pre-licensure clinical trials
- on all factor VIII products
  - plasma-derived
  - recombinant
  - future modified products

### ➤ Observation period defined by cumulative factor VIII exposure days, not time

# Proposed PS Program

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## Data Set (1)



### ➤ Minimum Data Set

- **Defined by:** Regulatory agencies with industry input
- **Focus:** Ascertain product immunogenicity
  - incidence / prevalence of HT / LT inh
  - at risk PTP population
  - risk period
  - outcomes
- **Goal:** Ongoing reassessment of product risk / benefit ratio

# Proposed PS Program

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## Data Set (2)



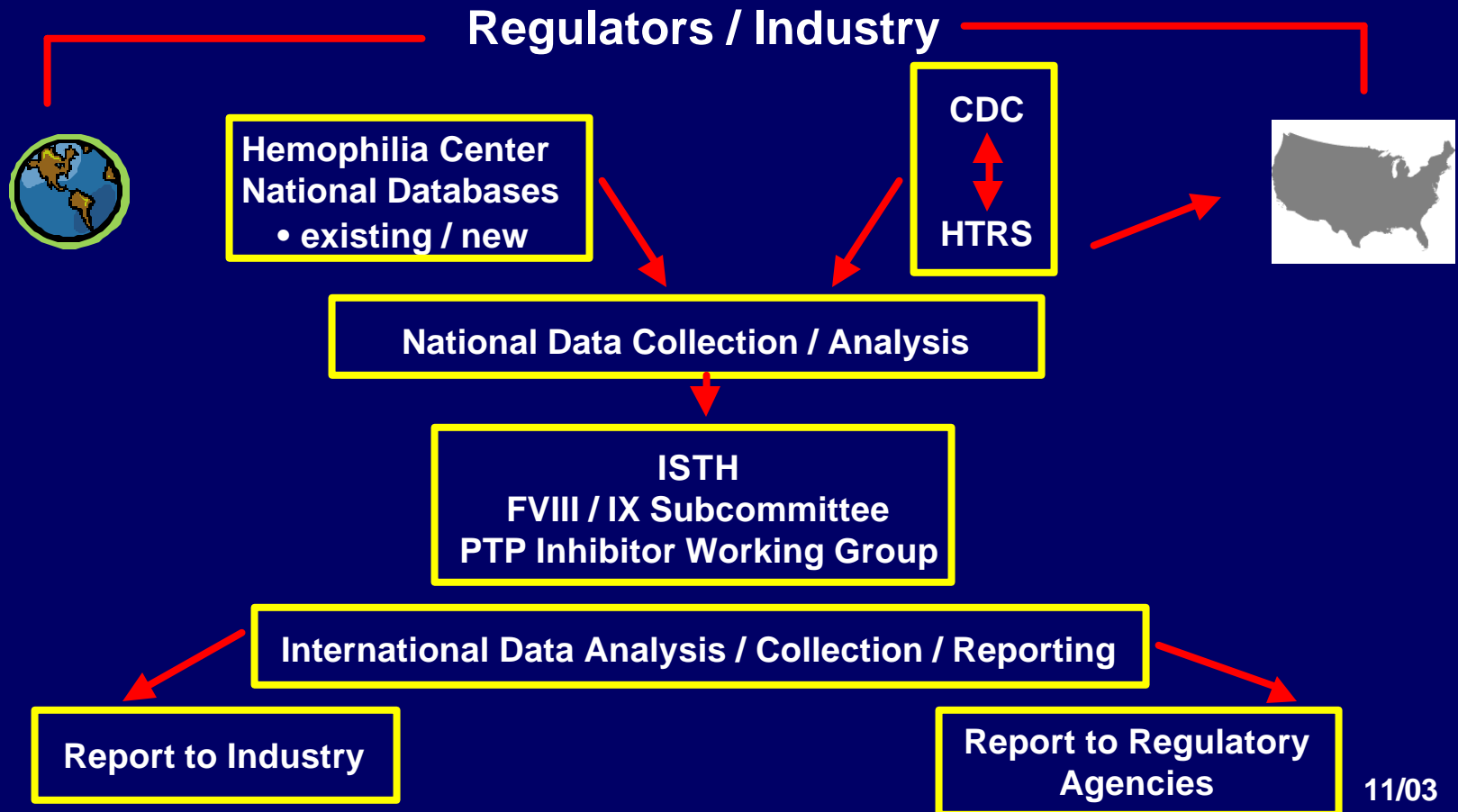
### ➤ Minimum Data Set

#### • Tools

- Adequately powered cohort size and observation period
- Reliable database for numerator<sup>#</sup> / denominator<sup>\*</sup> ascertainment
  - <sup>#</sup> clinician participation / adherence to protocol
  - <sup>\*</sup> industry-supported factor distribution data
- Strict definitions of
  - PTP with / without previous inhibitor
  - Inhibitor (HT / LT)
    - standardized assay (? centralized)
    - sensitivity / specificity criteria
    - inclusion of recovery / survival data?
  - Frequency of monitoring
  - Outcomes

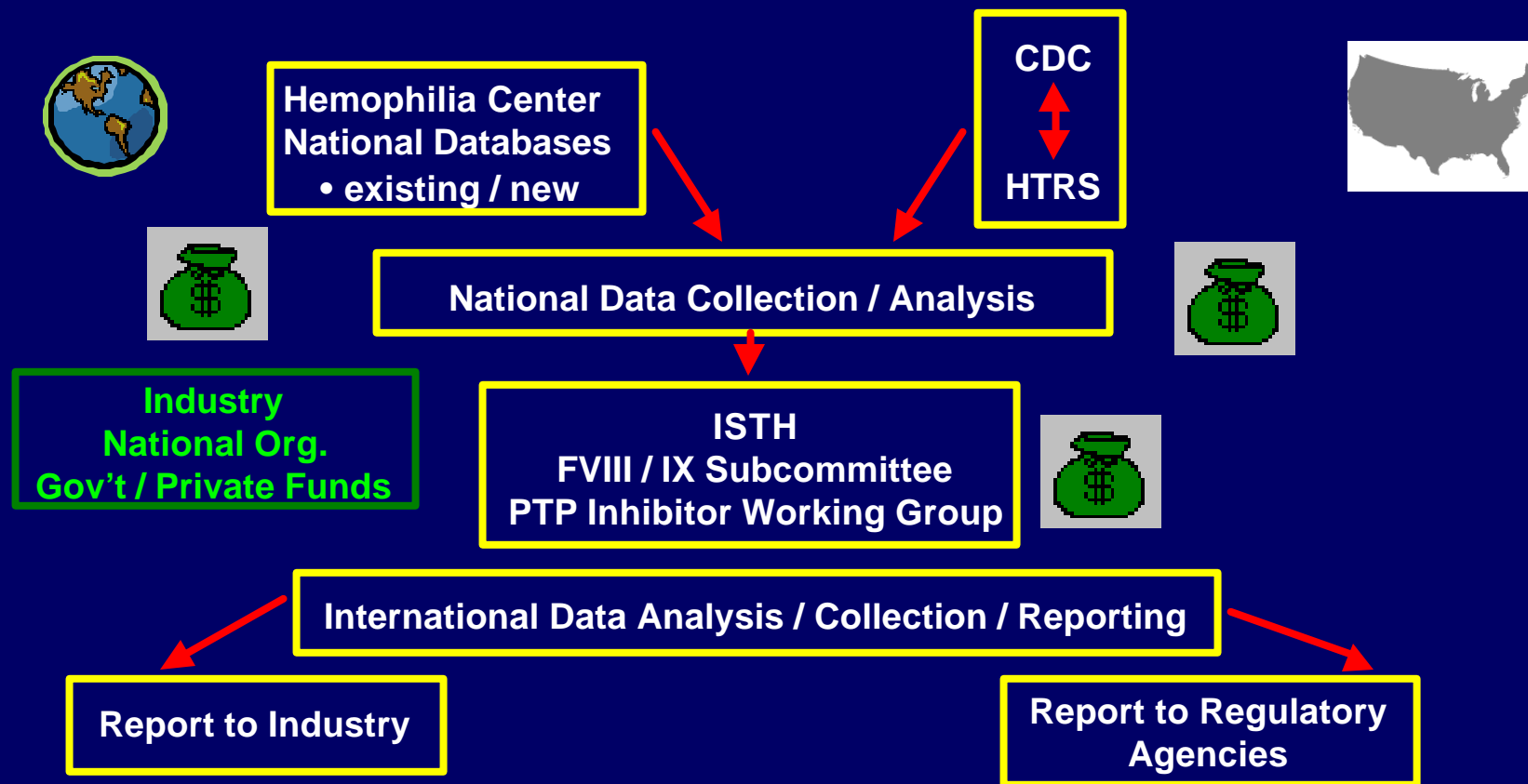
# Proposed PS Program

## MDS Collection / Analysis / Reporting



# Proposed PS Program / Funding

## MDS Collection / Analysis / Reporting



# Proposed PS Program

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## Data Set (3)



### ➤ Comprehensive Data Set

- **Defined by:** Clinical investigators / scientists
- **Focus:** Ascertain role of host and host / treatment interaction in PTP inhibitor formation
  - host hemophilia / immunologic genotype / phenotype
  - pertinent non-product-related inhibitor risk factors
  - type of hemorrhage / treatment specifics
  - anti-FVIII antibody characterization

# Proposed PS Program

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## Data Set (4)



### ➤ Comprehensive Data Set

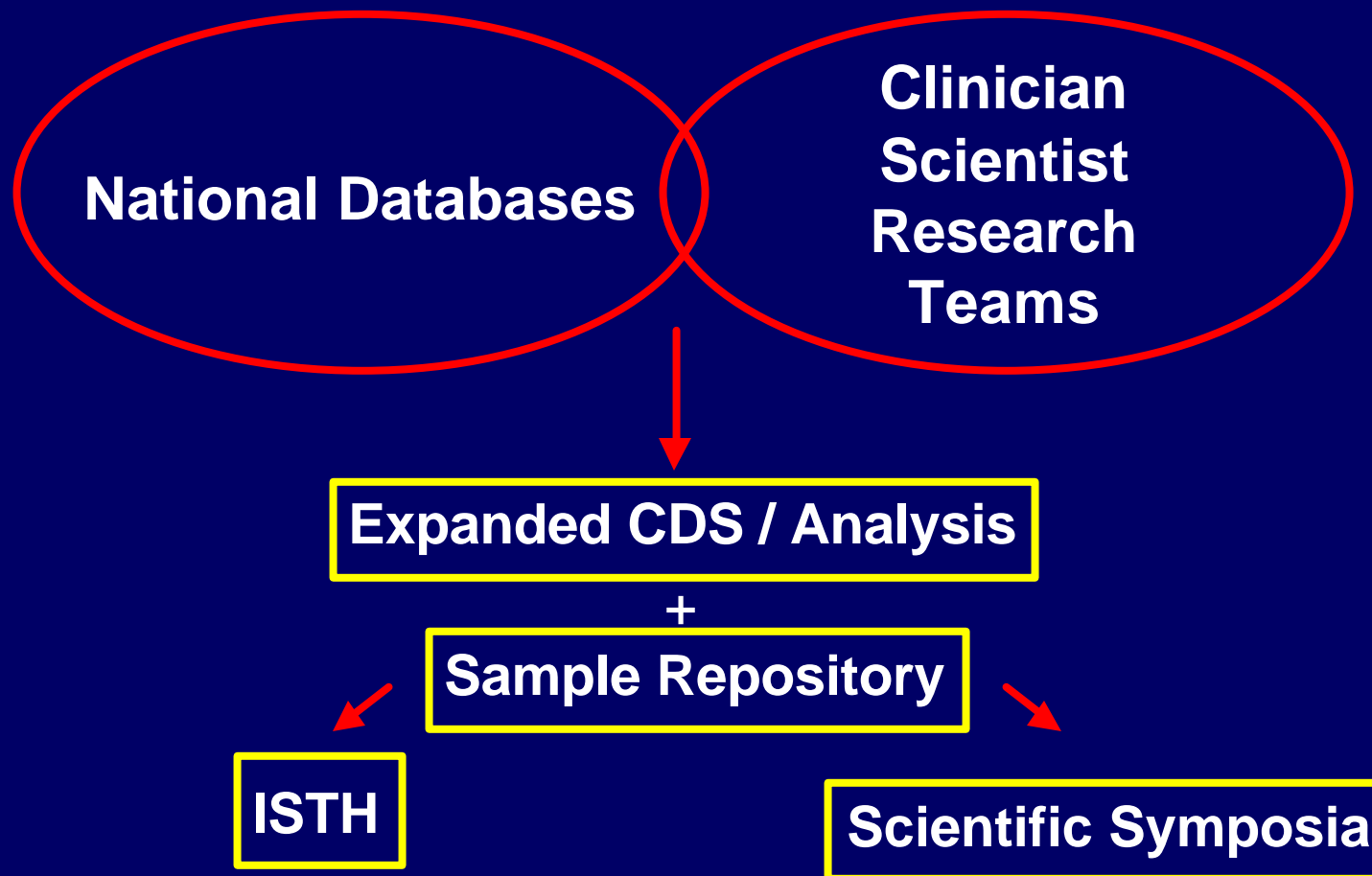
#### • Tools

- Adequately powered cohort size and observation period (case controls?)
- Comprehensive clinical database
- Prospective / retrospective sample collection / repository



# Proposed PS Program

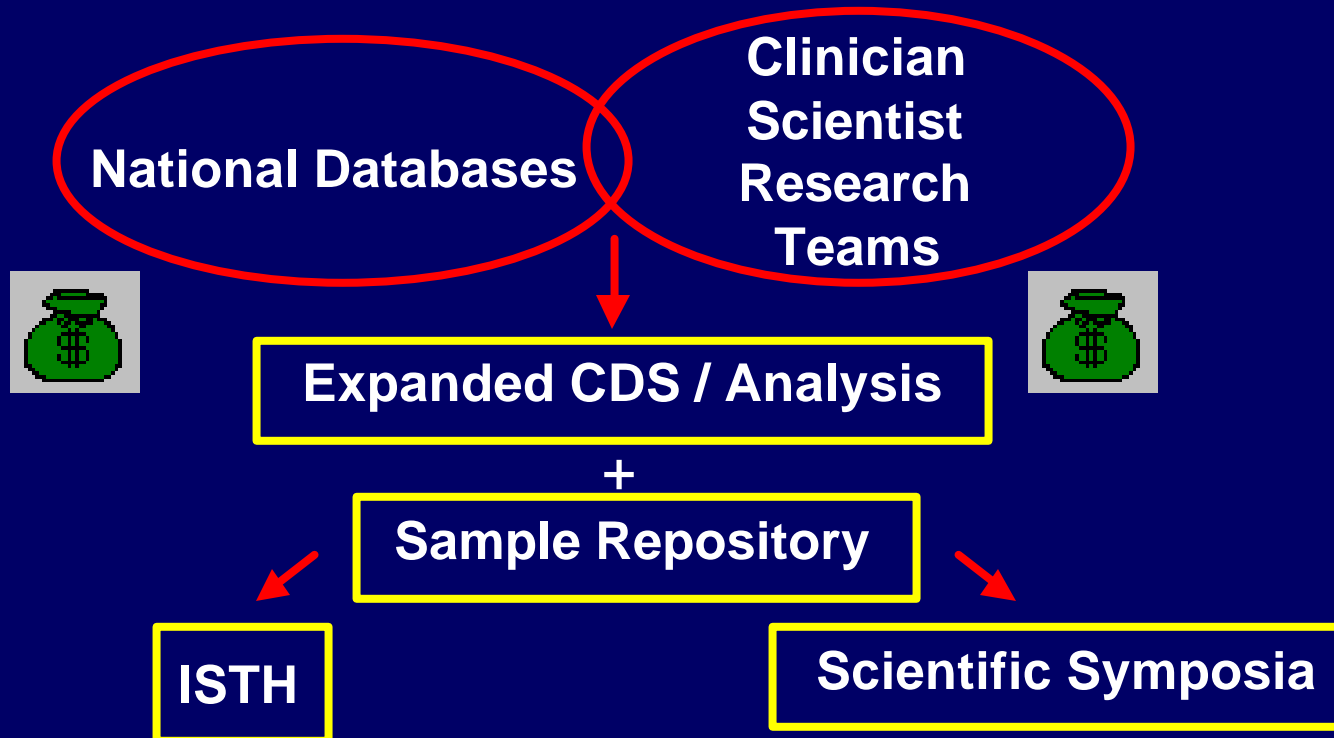
Comprehensive Data Collection / Analysis / Reporting



# Proposed PS Program / Funding

## Comprehensive Collection / Analysis / Reporting

Private / Public  
Research Grants



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## **Where to Go From Here**

**Moving forward**



- **Panel Discussion**
- **Crucial Decisions**